

RANSMITTAL

For FY 2006

Patent fees are subject to annual revision

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT: \$60.00

Complete if Known			
Application Number:	09/859,701		
Filing Date:	5/16/2001		
First Named Inventor:	Benjamin P. Warner		
Examiner Name:	Deborah A. Davis		
Group/Art Unit:	1641		
Attorney Docket No.:	S-94,661		

FEE CALCULATION (continued)

METHOD OF PAYMENT (check all that apply)

1.

The commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 12-2150 Deposit Account Name: Los Alamos National Laboratory

 □ Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17

FEE CALCULATION

1. COMBINED FILING FEE

Large Entity Small Entity

Fee	Fee	Fee Description	Fee Paid
1001 \$300	2001 \$150	Basic Filing fee	\$0.00
1004 \$300	2004 \$150	Reissue Filing fee	\$
1111 \$500	2111 \$250	Search Fee	\$0.00
1311 \$200	2311 \$100	Examination Fee	\$0.00
1005 \$200	2005 \$100	Provisional Filing F	ee
1085 \$250	2085 \$125	Provisional Size F	ee
(for each a	additional 50	sheets that exceeds 100	sheets)

SUBTOTAL (1) \$0.00

EXTRA CLAIM FEES/APPLICATION SIZE FEE

		Extra Claims	Fee from Fee Pai Below		
Total Claims	-20** =	Х	=	\$	0.00
Independent	-3 ** =	X	=	\$	0.00
Claims					
Multiple Depende	nt	X 180		= \$	0.00

^{**} or number previously paid, if greater; For Reissues, see below

Large	Small
Entity	Entity

ree	ree	ree Description
1202	\$50 2202 \$25	Claims in excess of 20
1201	\$200 2201 \$100	Independent claims in excess of 3
1203	\$360 2203 \$180	Multiple dependent claim, if not
		paid.
1204	\$200 2204 \$100	Reissue independent claims in

excess of 3 over original patent 1205 \$50 2205 \$25 Reissue claims in excess of 20

Total Claims Fee \$

over original patent

APPLICATION SIZE FEE

1081 \$250 2081 \$125.00 For each additional 50 sheets

that exceed 100 sheets, including specification and

drawings

SUBTOTAL (2) \$ 0.00

(Include total of Claims Fees and Size Fee here)

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Larg	е	Sm	all	
Entity		Entity		
Fee	Fee	Fee	Fee	

Fee Description Code (\$) Code (\$)

Fee Paid

1051 \$130 2051 \$65 Surcharge - late filing fee or oath

1052 \$50 2052 \$25 Surcharge - late provisional filing fee or cover sheet

1812 \$25201812 \$2520 For filing a request for reexamination

1251 \$120 2251 \$60 Extension for reply within first month \$60.00

1252 \$450 2252 \$225 Extension for reply within second month

1253 \$1020 2253 \$510 Extension for reply within third month

1254 \$1590 2254 \$795 .Extension for reply within fourth month

1255 \$2160 2255 \$1080 Extension for reply within fifth month

1401 \$500 2401 \$250 Notice of Appeal

1402 \$500 2402 \$250 Filing a brief in support of an appeal

1403 \$1000 2403 \$500 Request for oral hearing

Petition to revive - unavoidable 1452 \$500 2452 \$250

1814 **\$110** 2814 **\$55** Terminal Disclaimer

1453 \$1500 2453 \$750 Petition to revive - unintentional

1460 \$130 1460 \$130 Petitions to the Director

1806 \$180 1806 \$180 Submission of Information Disclosure Statement

1809 \$790 2809 \$395 Filing a submission after final rejection

(37 CFR 1.129 (a))

For each additional invention to be 1810 \$790 2810 \$395 examined (37 CFR 1.129(b))

1811 \$100 1811 \$100 Certificate of Correction

Publication fee for early, voluntary, 1504 \$300 1504 \$300 or normal publication/Republication fee

1801 \$790 2801 \$395 Request for Continued Examination (RCE)

Other fee (specify)

SUBTOTAL (3)

\$ 60.00

Reduced by Basic Filing Fee Paid

SUBTOTAL FROM 1 \$ 0.00 **SUBTOTAL FROM 2** \$ 0.00 **SUBTOTAL FROM 3** \$60.00

TOTAL AMOUNT OF PAYMENT

(Enter total amount at top of page)

\$60.00

SUBMITTED BY			Comp	Complete (if applicable)	
Printed Name:	Samuel L. Borkowsky		Reg. No.	42,346	
Signature:	Samuel J. Borkowsk	Date: January 16, 2007	Telephone	(505) 665-3111	